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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/017,513	12/14/2001	Maynard Grimm	MGJW-B01-Prv	8238
7	7590 08/16/2005		EXAMINER	
J. Carl Cooper		RECEIVED OIPE/IAP SEP 1 4 2005	GRIER, LAURA A	
Pixel Instruments Corp. 110 Knowles Drive			ART UNIT	PAPER NUMBER
Los Gatos, CA 95032-1828			2644	
			DATE MAILED: 08/16/2005	

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)				
Interview Summary	10/017,513	GRIMM ET AL.				
Interview Summary	Examiner	Art Unit				
·	Laura A. Grier	2644				
All participants (applicant, applicant's representative, PTO personnel):						
(1) <u>Laura A. Grier</u> .	(3)	•				
(2)	(4)	•				
Date of Interview: <u>17 August 2005</u> .						
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2)□ applicant's representative]						
Exhibit shown or demonstration conducted: d) Yes e) No. If Yes, brief description:						
Claim(s) discussed:						
Identification of prior art discussed:						
Agreement with respect to the claims f)□ was reached. g)□ was not reached. h)□ N/A.						
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>The applicant's arguments provided in the response to the Final rejection has been considered and are persuasive. The final rejection has been withdrawn, and new non-final will be provided.</u>						
(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)						
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.						
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Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature. If required

NEW CENTRAL FAX NUMBER

Effective July 15, 2005

On <u>July 15, 2005</u>, the Central FAX Number will change to **571-273-8300**. This new Central FAX Number is the result of relocating the Central FAX server to the Office's Alexandria, Virginia campus.

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